

Professional Indemnity Insurance

For Businesses who Design and Construct

Proposal Form

IMPORTANT NOTICE TO THE PROPOSER

To apply for Professional Indemnity Insurance, please fully complete this Proposal Form. It is very important that the person completing the Proposal Form understands that full disclosures must be made on the basis of proper enquiries and that the Proposal Form applies to the "Proposer" which includes all person(s) or businesses applying for insurance. This Proposal Form does not bind the Proposer or the Insurers to any insurance but will form part of any subsequent insurance policy issued.

SECTION 1 – ABOUT THE PROPOSER (Please write in block capitals or cross the appropriate boxes as required)

- 1 – Proposer(s) name: _____
- 2 – Principal address: (Also include any other office locations) _____

- 3 – Date established: _____
- 4 – Website & contact email address: _____

- 5 – Person to contact about insurance and contact telephone number(s): _____

- 6 – Professional or Trade Association membership: _____
- 7 – Company registration number: _____
- 8 – Provide a description of the principal sectors the Proposer operates in:

- 9 – Proposed inception date for policy:
(12 month policy period assumed)

SECTION 2 – SELECT LIMITS OF INSURANCE AND EXCESS

Select the limits of insurance sought:

£250,000 £500,000 £1,000,000 £2,000,000
 £3,000,000 £5,000,000 OTHER £ _____

Select the excess sought:

£500 £1,000 £2,500 £5,000
 £10,000 OTHER £ _____

SECTION 3 – ABOUT THE BUSINESS

- 10** – During the past 6 years (or since the Proposer commenced trading, if less) has the Proposer’s name been changed, has it acquired any other business or concern or has it participated in any merger or acquisition or consolidation? YES NO
 If Yes, please provide full details in Section 7 Additional Information.

- 11** – Is the Proposer connected or associated (financially or otherwise) with any other entity? YES NO
 If Yes, please answer the following:
- Is cover required for any work undertaken for any associated entity? YES NO
 If Yes, provide name, nature of the work undertaken and income derived from the associated entity in Section 7 Additional Information.

- 12** – List all partners, principals, directors and consultants under a contract of service:
 (use separate sheet if necessary)

Name	Qualifications	Date(s) Qualified*
1.		
2.		
3.		
4.		
5.		

*Attach a CV where the individual has no relevant qualifications.

- 13** – List total number of employees split between the following:

Principals and Senior Qualified	Other Technical and Qualified	Administrative	Total

SECTION 3 – ABOUT THE BUSINESS – CONTINUED

14 – Please state the Proposer’s turnover and then split into the following categories:

For Financial Year Ending: ____/____/20____	<u>Last Year</u>	<u>Current Year</u>	<u>Estimate for Next Year</u>
Turnover	£	£	£
a) % of total turnover where Proposer carries out construction / installation and is responsible for the design* and the design* is undertaken by Proposer’s own partners, directors or employees.	%	%	%
b) % of total turnover where Proposer carries out the construction / installation and the design* is undertaken by third parties appointed by or on behalf the Proposer. i.e. the Proposer is responsible for the design*.	%	%	%
c) % of total turnover where the Proposer carries out the construction / installation but has no responsibility for any aspect of the design* i.e. all work is to designs* provided by the Proposer’s clients or the general contractor without input from the Proposer.	%	%	%
d) % of all other turnover. Provide full details of the activities undertaken in Section 7 Additional Information.	%	%	%

* Design means any design or specification, feasibility study, technical information, calculation or survey carried out in relation to a contract.

15 – Please allocate below, as a percentage to a total of 100%, the fees/income for activities undertaken during the last complete financial year:

	<u>UK</u>	<u>Elsewhere*</u>	<u>Total</u>
Architectural			
Civil Engineering			
Electrical Engineering			
Environmental **			
Feasibility Studies – No design			
Heating and Ventilation Engineering			
Mechanical Engineering			
Project Management **			
Quantity Surveying			
Soil Engineering			
Structural Engineering			
Other (Specify) **			
			100.00%

* Please provide details in Section 7 Additional Information of work designated as elsewhere.

** Please provide details in Section 7 Additional Information of type of contracts or work undertaken.

SECTION 3 – ABOUT THE BUSINESS – CONTINUED

- 16 – Please allocate below, as a percentage to a total of 100%, the fees/income for activities undertaken during the last complete financial year:

	UK	Elsewhere*	Total
Airports, Runways, Aviation **			
Automotive**			
Bridges, Tunnels or Dams **			
Cladding or Curtain Walling			
Commercial Offices, Retail or Business Parks			
Demolition			
Foundations, Piling and Underpinning			
Glazing			
Harbours, Jetties, Off-shore or Marine Installations **			
High Rise Building			
Housing			
Leisure, Sport and Stadiums			
Lift Installation/Design			
Manufacturing Plants			
Military Projects **			
Mining**			
Nuclear or Atomic Projects **			
Power Stations and Plants			
Railways – Tracks/Signalling **			
Refineries, Petrochemical Installations			
Roads			
Roofing			
Schools, Universities, Hospitals, Municipal Buildings			
Sewerage, Drainage and Water Systems **			
Swimming Pools			
Other (specify) **			
			100.00%

* Please provide details in Section 7 Additional Information of work designated as elsewhere.

** Please provide further details in Section 7 Additional Information of type of contracts or work undertaken.

- 17 – Does the Proposer require coverage for any other activity, now ceased or which is due to commence, which is different to the description of the Proposer's business given in question 15 and 16? YES NO
 If Yes, please provide full details in Section 7 Additional Information.
- 18 – Does the Proposer require coverage for any consortium, joint venture or single project partnership the Proposer has entered into in the past or is planning to in the future? YES NO
 If Yes, please provide full details in Section 7 Additional Information.

SECTION 3 – ABOUT THE BUSINESS – CONTINUED

19 – What percentage of turnover on average over the last 3 years has been paid to outside or sub consultants or third parties? _____ %

If fees are paid to outside or sub consultants or any third parties for design work are they engaged in a binding contract accepting responsibility for their own neglect, error or omission for the work they undertake?

YES NO

If No, please provide full details in Section 7 Additional Information including nature of work and projects undertaken.

20 – Please list the Proposer's five largest contracts undertaken in the last six years:

Project 1

Date started: _____

Name and type of project: _____

Services performed: _____

Total contract value: _____

Estimated completion date: _____

Project 2

Date started: _____

Name and type of project: _____

Services performed: _____

Total contract value: _____

Estimated completion date: _____

Project 3

Date started: _____

Name and type of project: _____

Services performed: _____

Total contract value: _____

Estimated completion date: _____

Project 4

Date started: _____

Name and type of project: _____

Services performed: _____

Total contract value: _____

Estimated completion date: _____

Project 5

Date started: _____

Name and type of project: _____

Services performed: _____

Total contract value: _____

Estimated completion date: _____

SECTION 3 – ABOUT THE BUSINESS – CONTINUED

- 21 – Has the Proposer ever failed to complete a project?
If Yes, please explain the reason and type of project in Section 7 Additional Information. YES NO
- 22 – Has the Proposer ever accepted liability for designs completed by others by way of any legal agreement?
If Yes, please list all projects concerned, their values and completion dates in Section 7 Additional Information. YES NO
- 23 – Is all the Proposer's work undertaken using well-established techniques and practices?
If No, please explain any new techniques or practices used or planning to be used in Section 7 Additional Information. YES NO

SECTION 4 – RISK MANAGEMENT

- 24 – Does the Proposer have written procedures or checklists for the services performed? YES NO
- 25 – Are all of the Proposer's contracts and terms of engagement in writing? YES NO
- 26 – Are changes to work orders or design specifications during the course of a contract always confirmed in writing? YES NO
- 27 – Does the Proposer always obtain satisfactory written references when engaging employees?
If the answer to any of the questions 24 to 27 is No, please provide full details and explanations in Section 7 Additional Information. YES NO

SECTION 5 – PREVIOUS INSURANCE

- 28 – Has any Proposal for Professional Indemnity Insurance (or similar insurance) made by or on behalf of the Proposer or its business or other activity, or any predecessors of the Proposer or its business or other activity or any principal, partner or director of the Proposer been declined in the past or has such insurance been cancelled, renewal refused or has any special terms been imposed on them? YES NO
- 29 – Does the Proposer currently purchase Professional Indemnity Insurance?
If Yes, please answer the following: YES NO
- a) Does the expiring policy have a retroactive date?
(If the answer is No, retroactive coverage will be from the date that the Professional Indemnity Insurance is or was first purchased and continually renewed). YES NO
- b) If the Proposer has answered Yes to 29a above please enter the:
- i) retroactive date _____
- ii) the current Insurer(s) _____

Similar to other professional insurances, the Angel Professional Indemnity Policy is underwritten on what is known as a 'claims made basis.' This means that the policy will only provide cover against those claims or circumstances that are discovered and notified to the Insurers during the period of insurance. The nature and type of insurance cover offered can vary from policy to policy and insurer to insurer. It is therefore important the Proposer ensures the cover meets its needs and if in any doubt seeks professional advice from their insurance broker.

Angel Underwriting Limited is regulated by the Financial Services Authority (FSA). Further information about the FSA can be found on their website at www.fsa.gov.uk and www.moneymadeclear.fsa.gov.uk. Information about Angel Underwriting Ltd can be found at www.angelunderwriting.com.

DATA PROTECTION

By signing this Proposal Form the Proposer consents to the Insurer or its representatives using the information Insurers may hold about the Proposer for the purpose of providing insurance and handling claims and to process sensitive personal data about the Insured where this is necessary in compliance with the provisions of the Data Protection Act 1998. This may necessitate providing such information to third parties.

MATERIAL FACTS

All material facts must be disclosed, including any which might be expected to arise or change prior to the inception date of the contract of insurance. Failure to do so may cause the contract of insurance to be void. A material fact is one likely to influence the acceptance or assessment of the risk by Insurers. If the Proposer is in any doubt as to what constitutes a material fact they should consult their insurance broker.

DECLARATION

The Proposer warrants to the best of his or her knowledge and belief that all the information contained in this Proposal Form is true and includes all material information. The Proposer warrants that if the information supplied herein changes between the date of this Proposal and the inception date of the Policy, the Proposer will immediately notify the Insurers of such change, and accepts that in such circumstances any quotation may be modified or withdrawn. The signatory below is authorised to sign this Proposal on behalf of the Proposer.

- More information is attached to this Proposal Form
- I would like my broker to contact me before completing my Policy

Signature: _____

Dated: _____

Print Name: _____

Title: _____

Your Broker's Details: